

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 7808-AG09-0202-021

IN THE MATTER OF:

Harvey Meadvin )  
Agent / Respondent )

5221 Pinetree Rd. )  
Parkland, FL 33067 )

Type of Agency Action: Enforcement )

Indiana Insurance License No.: 573046 )

**FILED**

MAR 31 2009

STATE OF INDIANA  
DEPT. OF INSURANCE

**FINAL ORDER AND APPROVAL**

The Indiana Department of Insurance ("Department") and Harvey Meadvin ("Respondent"), a licensed non-resident Indiana Insurance producer, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent's license, and which has been submitted to the Commissioner of Insurance (the "Commissioner") for approval. (See Exhibit 'A' attached hereto)

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Commissioner of Insurance:

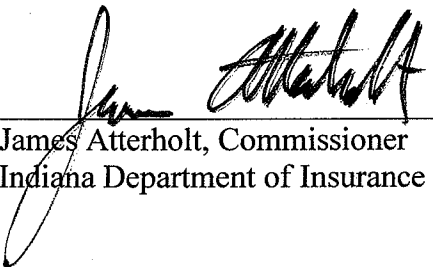
1. Respondent shall pay an administrative fine in the amount of one thousand dollars (\$1000.00), payable within sixty (60) days from the date this Final Order is filed.

2. Respondent, if Respondent has not already done so, shall file a semi-annual tax report for January through June 2008 within ten (10) days from the date this Final Order is filed.

3. Respondent shall be on probation for a period of one (1) year during which time, and at all times in the future, Respondent shall comply with Indian Insurance Law including Indiana Code 27-1-15.8-4(c).

4. The Department shall accept Respondent's compliance with the terms of this Final Order as full resolution of this matter.

ALL OF WHICH IS ORDERED this 31 day of March, 2009.

  
James Atterholt, Commissioner  
Indiana Department of Insurance

Distribution:

Laura Willett  
**INDIANA DEPARTMENT OF INSURANCE**  
311 West Washington Street, Suite 300  
Indianapolis, Indiana 46204-2787

Harvey Meadvin  
5221 Pinetree Rd.  
Parkland, FL 33067

STATE OF INDIANA )  
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COUNTY OF MARION )

BEFORE THE INDIANA  
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Harvey Meadvin  
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Parkland, FL 33067

Type of Agency Action: Enforcement

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STATE OF INDIANA  
DEPT. OF INSURANCE

**AGREED ENTRY**

This Agreed Entry is entered into by Laura A. W. Levenhagen, attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Harvey Meadvin ("Respondent"), a licensed Indiana non-resident insurance producer holding license number - 573046, to resolve all matters in the above referenced administrative action. This Agreed Entry is subject to the review and approval of James Atterholt, Commissioner for the Indiana Department of Insurance.

WHEREAS, Respondent is a licensed non-resident insurance producer holding license number 573046.

WHEREAS, Respondent has been qualified as a surplus lines producer in accordance with and as defined under Indiana Code Section 27-1-15.8 *et seq* and is therefore bound by all requirements and restrictions contained therein.

**EXHIBIT**

A

7. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full resolution of this matter.

8. Respondent is aware that his failure to comply with any terms of this agreement will result in the matter being set for hearing.

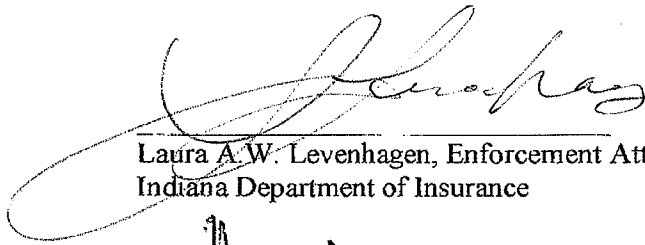
9. Respondent has carefully read this agreement and fully understands and accepts its terms.


3/24/09

Date Signed

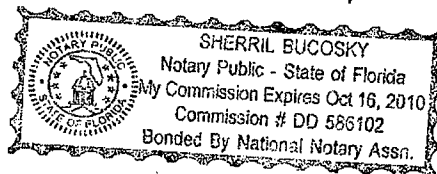
3/23/09

Date Signed

  
Laura A.W. Levenhagen, Enforcement Attorney  
Indiana Department of Insurance

  
Harvey Meadvin, Respondent





STATE OF FL )  
COUNTY OF Broward ) SS:

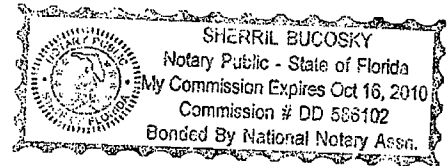
Before me a Notary Public for Broward County, State of FL,  
personally appeared Harvey Meadvin and being first duly sworn by me upon his oath, states that  
the facts alleged in the foregoing instrument are true. Signed and sealed this 23 day  
of March 2009.

Sherril Bucosky  
Notary Signature

Sherril Bucosky Notary  
Name Printed

My Commission expires: 10/16/2010

County of Residence: Broward



**Return original NOTARIZED document to:**

INDIANA DEPARTMENT OF INSURANCE  
Enforcement Division  
Suite 300  
311 West Washington Street  
Indianapolis, IN 46204-2787  
317/233-4243 - telephone  
317/232-5251 - facsimile